OFF DUTY RECREATIONAL MISHAP REPORTING TRAINING PRESENTATION

SPARC | Shore/Ground | Motor Vehicle | DJRS | Search/Edit | Home

- Initial Notification (Class A/B Only)
- Mishap Reporting
- Hazard Reporting

- Cargo Air Drop
- Parachuting (On-Duty)
- Diving
- Explosive (On-Duty)
- Helo Rope Suspension Technique
- Off-Road Vehicles (Off-Duty)
- Tactical Vehicle in Operation
- PMV/GMV in Operation
- All Other Mishap Types

Consolidated

Draft (34)

Edit Submitted (4)

Hazard (2)

Brief Narrative
sean-test-new-1

General Information
Involved Commands
Involved Properties
Involved Personnel
Factors
Recommendations

General Info

This is the starting point for entering the mishap.

Please complete all relevant General Information fields (including Point of Contact, Location, Authorized Drafters, and Environment if applicable) and proceed to the Involved Commands section.

General Information

Select Mishap Type(s):

Select...

- OFF DUTY ACTIVITY (EXCLUDES PMV MISHAPS)

UIC of Command Submitting Report:

Was DoD Property Damaged:

○ Yes ○ No

Was Non-DoD Property Damaged

○ Yes ○ No

Date of Mishap (yyyy-mm-dd)

Time of Mishap (Local Time)

Local Serial Number (For personal serialization)

Brief Narrative (1 or 2 sentence description of the event that does not contain names or PII)

Was environment a factor?

○ Yes ○ No ○ Unknown

Was alcohol a factor?

○ Yes ○ No

Were drugs a factor?

○ Yes ○ No

Mishap Narrative - Please do not enter PII (Personally Identifiable Information), names, SSNs, unit names, etc. This narrative should answer the questions who, what, when, where, why and how?

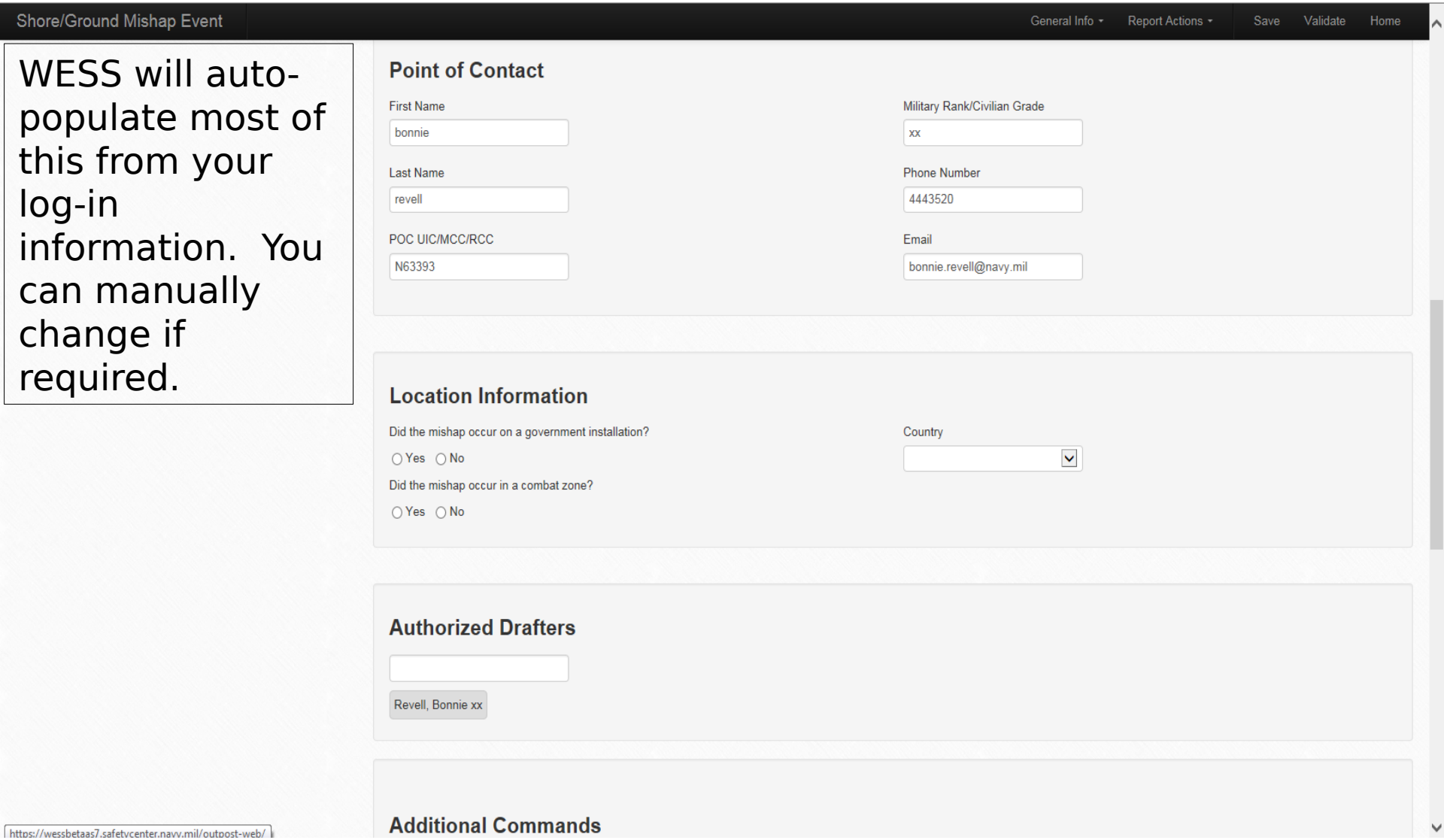
Classified Supplement Submitted?

○ Yes ○ No ○ Unknown

Area of Responsibility (Option for class C/D mishap)

Was high risk training involved?

○ Yes ○ No



WESS will auto-populate most of this from your log-in information. You can manually change if required.

General Information
Involved Commands
Involved Properties
Involved Personnel
Factors
Recommendations

Involved Commands

Please complete all Involved Command fields and proceed to the next page. If the mishap involves a property, proceed to the Involved Properties section - otherwise proceed to the Involved Personnel section.

To add a new Involved Command click the "Involved Commands" drop down and select "Add Command".

Please enter all commands involved in the mishaps. Mishaps may require more than one Involved Command.

Involved Command 1

UIC Contributing To/Experiencing Loss from the Mishap:

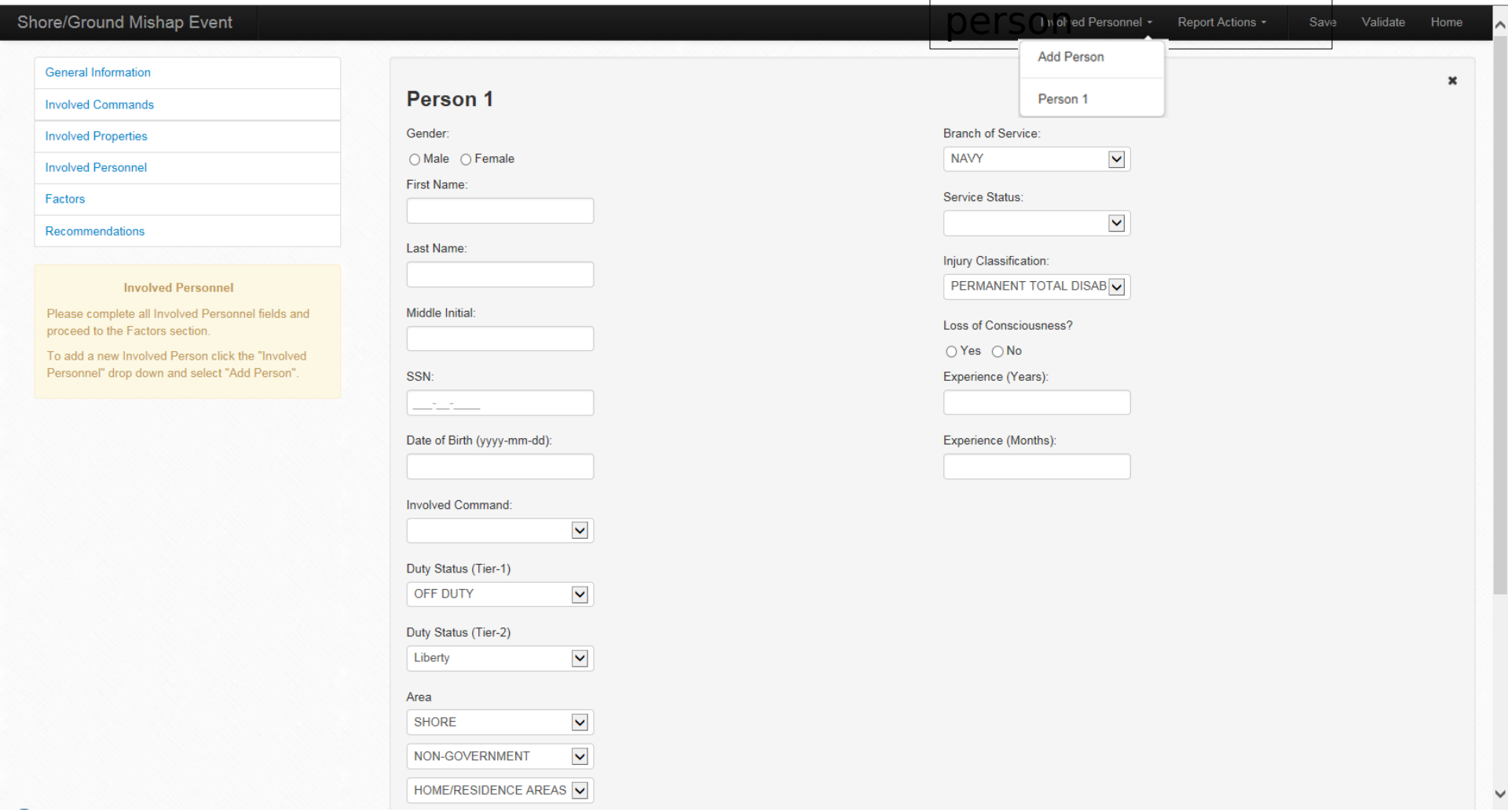
N63393 (NAVAL SAFETY CENTI

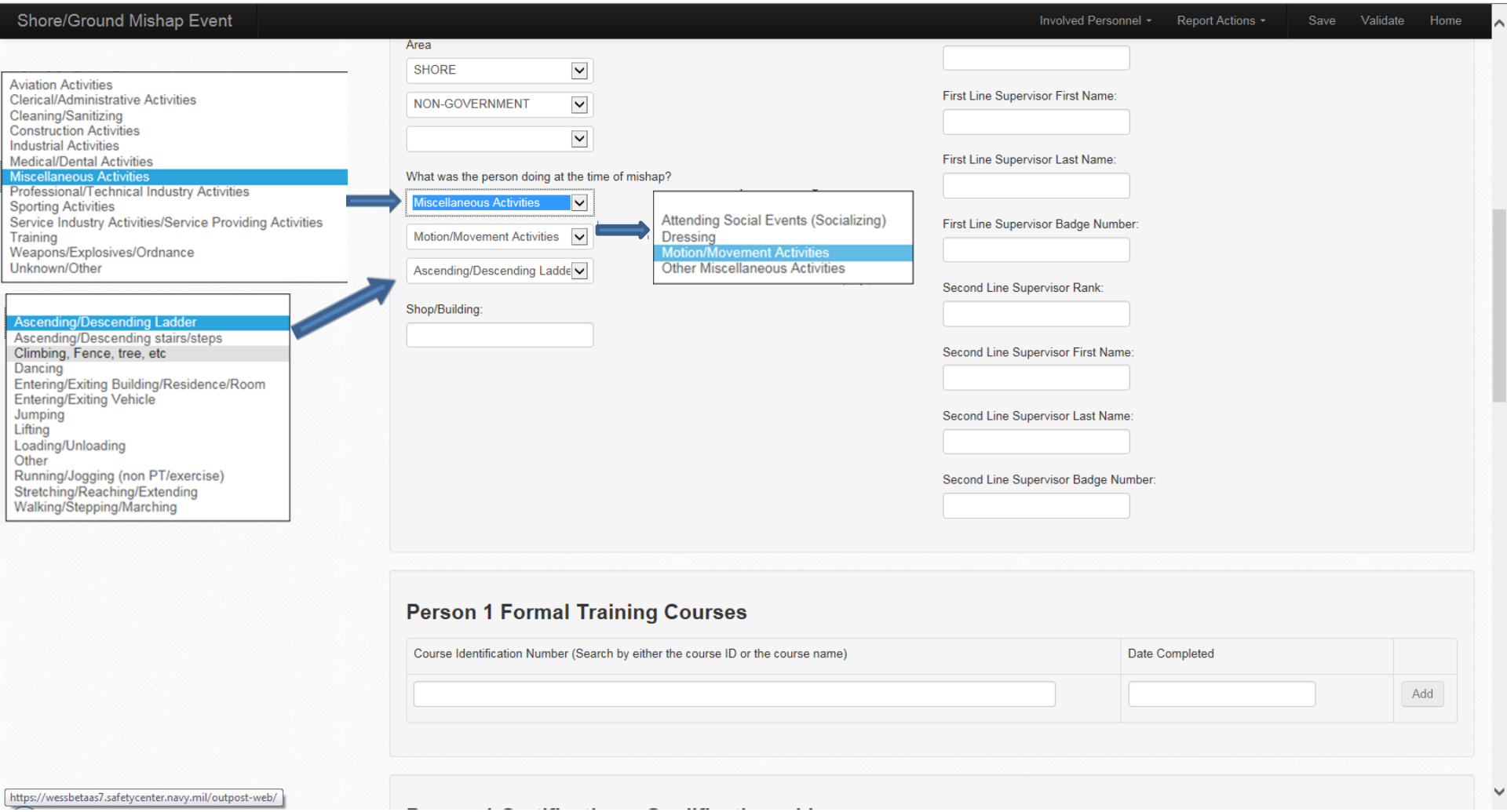
Operational Contingency (US Naval Only, Optional for class C/D Mishaps):

Is Involved Command a Naval Vessel or a Small Craft?

○ Yes ◉ No

To add people, select the “add” person




Shore/Ground Mishap Event
Involved Personnel
Report Actions
Save
Validate
Home
Area
SHORE
NON-GOVERNMENT
What was the person doing at the time of mishap?
Miscellaneous Activities
Motion/Movement Activities
Ascending/Descending Ladde
Shop/Building:
Aviation Activities
Clerical/Administrative Activities
Cleaning/Sanitizing
Construction Activities
Industrial Activities
Medical/Dental Activities
Miscellaneous Activities
Professional/Technical Industry Activities
Sporting Activities
Service Industry Activities/Service Providing Activities
Training
Weapons/Explosives/Ordnance
Unknown/Other
Attending Social Events (Socializing)
Dressing
Motion/Movement Activities
Other Miscellaneous Activities
Ascending/Descending Ladder
Ascending/Descending stairs/steps
Climbing, Fence, tree, etc
Dancing
Entering/Exiting Building/Residence/Room
Entering/Exiting Vehicle
Jumping
Lifting
Loading/Unloading
Other
Running/Jogging (non PT/exercise)
Stretching/Reaching/Extending
Walking/Stepping/Marching
First Line Supervisor First Name:
First Line Supervisor Last Name:
First Line Supervisor Badge Number:
Second Line Supervisor Rank:
Second Line Supervisor First Name:
Second Line Supervisor Last Name:
Second Line Supervisor Badge Number:
Person 1 Formal Training Courses
Course Identification Number (Search by either the course ID or the course name)
Date Completed
Add
https://wessbetaas7.safetycenter.navy.mil/outpost-web/

Person 1 Certifications, Qualifications, Licenses

Provide all Licenses, Qualifications, and Certifications that are relevent to the mishap

License/Qual./Cert.	Date Completed	Date Expired	Restricted	Revoked/Lapsed?	Revoked/Lapsed Narrative	
						Add

Person 1 Personal Protective Equipment

If PPE was not required, or was required and worn properly, functioned properly, and was not a factor in the mishap, you may skip this entry page.

PPE	Used?	Used Properly?	Functioned Properly?	Narrative	
					Add

Person 1 Injury

Is PHA current?

○ Yes ○ No

Was this a heat stress or cold injury?

○ Yes ○ No

Was this person treated in an emergency room?

○ Yes ○ No

OSHA Classification code?

Type of facility that provided medical treatment:

Event or exposure - How was the injury produced?

https://wessbetaas7.safetycenter.navy.mil/outpost-web/

Was this person treated in an emergency room?

○ Yes ○ No

Was this person permanently transferred out of the command due to this injury?

○ Yes ○ No

Were chemical substances or toxic exposures involved?

○ Yes ○ No

Was this person admitted to a hospital?

○ Yes ○ No

One or more lost work days beyond the day of injury?

○ Yes ○ No

Light/Limited duty, restricted work, or partial work days?

○ Yes ○ No

One or more days of job transfer beyond the day of injury?

○ Yes ○ No

Event or exposure - How was the injury produced?

BLS Source of Injury Codes?

How were you notified of the mishap?

Offsite Medical Treatment Information

Name of the physician that provided treatment:

Facility Name:

Street Address:

City:

State:

Zip Code:

Person 1 Injured Body Parts

Primary Injured Body Part	BLS Nature of Injury Code	What Body Part was Injured	
○ Yes ○ No			Add

General Information
Involved Commands
Involved Properties
Involved Personnel
Factors
Recommendations

Factors

This page is to identify the causal factors of a mishap. Identifying the factors that lead up to a mishap is crucial in mishap prevention. A mishap must have at least **one** factor.

Please complete all Factor fields and proceed to the Recommendations section if necessary. If no recommendation is necessary, please Validate and Release the report.

To add a new Factor click the "Factors" drop down and select "Add Factor".

Factor 1

Factor Type:

(•) Human ( ) Material

Factor:

RAC:

Statement: (Brief statement re-stating factor - i.e. personnel did not follow SOP)

Analysis: (Provide a complete explanation of the chosen factor)

Please select the person(s) this factor applies to:

[ ] Person 1

Preconditions
These are factors in a mishap if active and/or latent preconditions such as: conditions of the operators, environmental or personnel factors affect practices, conditions or actions of individuals and result in human error or an unsafe sitution.

Code	Description	
		Add

Supervisory
Is a factor in a mishap if the methods, decisions or policies of the supervisory chain of command directly affect practices, conditions, or actions of individual and result in human error or an unsafe situation.

Code	Description	
		Add

Organizational
Are factors in a mishap if the communications, actions, omissions, or policies of upper-level management directly or indirectly affect supervisory practices, conditions, or actions of the operator(s) and result in system failure, human error, or an unsafe situation.

Code	Description	
		Add

General Information
Involved Commands
Involved Properties
Involved Personnel
Factors
Recommendations

Recommendations

Please complete all Recommendation fields and validate and release the report.

To add a new Recommendation click the "Recommendations" drop down and select "Add Recommendation".

Recommendation 1

Statement:

Remarks:

Status:

Please select the factor(s) this recommendation applies to:

☐ Factor 1